APPLICATION FOR EMPLOYMENT
Borough of Lebanon
Date:
6 High Street Lebanon, NJ 08833
Applicant Information:

Name (Last, First, Middle):

_____

Address:

_____

City/Town:

_____

Phone (Work): (   )_____   (Home): (
)_____
Social Security Number: _____ - ____ -_____

Position applied for:

_____

Have you ever applied to the Borough of Lebanon before: ____ Yes ____ No
If yes, give date_____

Date you can start: _____ Salary desired:
_____

Are you available to work: ____ Full time____ Part time____ Shift work ____
Temporary

Are you currently employed: ____ Yes ____ No   May we contact you at work:
____Yes ____No

May we contact your current employer: ____ Yes ____No

Are you currently on layoff status and subject to recall: ____Yes ____No

Do you possess a current driver's license: ____Yes ____ No

Do you possess a current commercial driver's license: _____ Yes _____ No

Please list any endorsements:

_____

If you are under eighteen years of age, can you provide proof of eligibility to work:
___ Yes ___No

Are you legally eligible to work in the United States of America: ____Yes ____ No
Pursuant to Federal Law, proof of US Citizenship or immigration status will be
required if you are hired.

Have you ever plead guilty or been found guilty of a crime; disorderly persons

offense; or a municipal ordinance involving moral turpitude: ____ Yes ____ No

Employment is conditional upon the results of the criminal background check. An answer of "Yes" may disqualify you from employment depending upon the circumstances involved. If "Yes", please explain below.

The Borough of Lebanon is an Equal Opportunity Employer M/F

Employment History: This section must be completed even if you attach a resume. List your last four employers, major assignments within the same employer. Begin with the most recent. Include any military service. Explain any gaps in employment in the space on this form marked comments located on the bottom of this page.

Employer:	Date started:	Date left:	Work performed/ responsibilities:
Address:			
	Starting Salary:		
Job Title:	Final Salary:		
Reason for leaving:			
Supervisor's name and phone number:			
May we contact for a reference: ___Yes ___No			
Employer:	Date started:	Date left:	Work performed/ responsibilities:
Address:			
	Starting Salary:		
Job Title:	Final Salary:		
Reason for leaving:			
Supervisor's name and phone number:			
May we contact for a reference: ___Yes ___No			
Employer:	Date started:	Date left:	Work performed/ responsibilities:
Address:			
	Starting Salary:		
Job Title:	Final Salary:		
Reason for leaving:			
Supervisor's name and phone number:			
May we contact for a reference: ___Yes ___No			
Employer:	Date started:	Date left:	Work performed/ responsibilities:
Address:			
	Starting Salary:		
Job Title:	Final Salary:		
Reason for leaving:			
Supervisor's name and phone number:			
May we contact for a reference: ___Yes ___No			

Comments:

Education: Provide information on your formal schooling and education. Include elementary, secondary, and post-secondary education, if any. Include any formal vocational or professional education. For high school and post-secondary education, indicate any major or specialty, such as Academic, Business, or Trade.

School:	Years completed: (Circle)	Graduated: (Circle)	Major Field:
Elementary:	5 6 7 8	Yes No	N/A
High:	1 2 3 4	Yes No	
College:	1 2 3 4	Yes No	
Other:	1 2 3 4	Yes No	

Languages: List any foreign languages you know and indicate your level of proficiency.

Language:	Speak Some:	Speak Fluently:	Read:	Write:

Special Skills & Experience: State any special skills, experience, training, licenses, certifications or other factors that make you especially qualified for the position for which you are applying.

Comments & Additional Information: Is there any additional information about you we should consider?

References: Provide the names, addresses and phone numbers of three people whom we may contact as a reference. They should <u>not</u> be relatives or former supervisors.

Name & Address:	Phone Number:	Years Known:

Understandings and Agreements:

As an applicant for a position with the (local unit name), I understand and agree that I must provide truthful and accurate information in this application. I understand that my application may be rejected if any information is not complete, true and accurate. If hired, I understand that I may be separated from employment if the (local unit type) later discovers that information on this form was incomplete, untrue, or inaccurate. I give the (local unit name) the right to investigate the information I have provided, talk with former employers (except where I have indicated they may not be contacted). I give the (local unit type) the right to secure additional job-related information about me. I release the (local unit name) and its representatives from all liability for seeking such information. I understand that the (local unit name) is an equal-opportunity employer and does not discriminate in its hiring practices. I understand that the (local unit type) will make reasonable accommodations as required by the Americans with Disabilities Act. I understand that, if employed, I may resign at any time and that the (local unit type) may terminate me at any time in accordance with its established policies and procedures. No representatives of the (local unit type) may make any assurances to the contrary. I understand that any offer of employment may be subject to job-related medical, physical, drug, or psychological tests. I also understand that some positions may involve complete background and criminal checks.

Applicant's Signature _____ **Date** _____

Conditions of Employment:

Please be advised that all offers of employment are conditional on the applicant passing a mandatory criminal background check and drug test. A pre-employment physical may also be required. Pursuant to our personnel policy, all job applicants are required to sign a consent form for drug testing and if the test results are positive and are not accounted for by the legal use of prescription or non-prescription drugs the applicant shall be ineligible for hire unless they can establish a legal basis for the use of the drug or controlled substance for which they test positive. *For your application to be considered, you must sign and date below.*

Applicant's Signature _____ **Date** _____